

# VALEDICTORY ADDRESS

DELIVERED IN CONNECTION WITH

## The Graduation Ceremony

AT

THE UNIVERSITY OF GLASGOW,

*31st JULY, 1890.*

BY

DR. M'CALL ANDERSON,

*Professor of Clinical Medicine in the University.*

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GENTLEMEN AND FELLOW-GRADUATES OF THE UNIVERSITY,—It is my privilege, in the name of my colleagues, to congratulate you upon the successful issue of your studies, and upon the attainment of the position for which you have so long and so arduously been labouring.

It is not for me to say anything calculated to diminish the pleasure which you naturally feel at such a time, or to dwell upon the difficulties which lie before you in your endeavours to attain success. It is true that, year by year, the ranks of our profession are becoming more and more crowded, but in this it differs in no respect from the other learned professions; indeed, the same eager competition is encountered in every department of life. There is, therefore, no ground for dejection in this, especially as, to the energetic and high-spirited young man—and I take it that you all desire to be placed in this

category—there is nothing more exhilarating than to plunge into the battle of life ; and I think my colleagues will agree with me when I say that we look back upon the years when we were little, if at all, known, and when we were slowly climbing up the professional ladder, as one of the happiest periods of our lives. To many of your teachers, alas ! this agreeable incitement to exertion will soon be a thing of the past, while *you* are in the happy position of knowing that it lies before you, and at your very feet.

Make good use of your opportunities now, for the course which you pursue during the next few years will seal your future careers, and mould your characters for ever.

In my address at the opening of the medical classes last winter, I refrained from offering you advice, but, on this occasion, I must be allowed, to a certain extent, to depart from that reticence, for I am sure that some of you, at all events, will be glad of some guidance as to the course which you should pursue in the immediate future ; but, as your circumstances and surroundings are very various, I cannot offer advice which is equally feasible for all.

“ All work and no play makes Jack a dull boy,” and I would, therefore, strongly advise you, after your recent labours, to throw aside your books for a time and to enjoy your “ *otium cum dignitate*,” for you will find that it is much easier to take holidays at the commencement of your professional career, than after you are on the high road to success. Not that it is impossible then, for I hold that, from time

to time, no matter how busy a man may be, it is a duty which he owes to his patients, no less than to himself, to forsake his field of labour, to forget that there is such a thing as ill health, and to look upon his fellow-creatures in any other light than that of interesting cases.

I remember, on one occasion, telling a chronic patient that I would not see him again till Monday as I was going to the country at the end of the week, upon which he said, "Is there no such thing as a medical man who never takes a holiday?" to which I replied that I dared say such a person might be discovered, but that, when found, I feared his advice would not be of much value.

On another occasion when my wife was going out, she met this same gentleman at my door, and said to him that she was extremely sorry he could not see me as I was laid up with typhoid fever, to which he replied, "Dear me, that's most provoking." But such selfishness, I am glad to think, is not a common attribute of patients, who have, as a rule, a generous appreciation of the hard work which is entailed upon the busy practitioner, and of the necessity for periods of repose.

Well, then, after a good holiday, what path are you to follow? My strong advice to you is to leave no stone unturned in your endeavours to obtain appointments as resident medical officers in the Western, or other Infirmaries. Of course it is not every one who can succeed in this, and those who have distinguished themselves during their college course have a preferable claim, although I am quite

sure that it is not always the prizeman who makes the best assistant, and as for a genius, I hope I may ever be spared such an affliction. A year's residence in the Western Infirmary is, to the intelligent and industrious student, worth much more than listening to oceans of lectures, or the perusal of bushels of books. For my own part I look back upon my two years' residence in the Royal Infirmary as amongst the most profitable and the most enjoyable of my life, and I have no hesitation in saying that he who does not avail himself of such an opportunity, when within his reach, is doing himself an injustice which can never entirely be repaired.

Another opening is that of assistant to a general practitioner in large practice. This is a very different affair from the system of apprenticeships which prevailed so universally in former times, and which, I am surprised to see, is still advocated by some at the present day, because, in the former case, your completed professional course puts you in a position to profit fully from the work in which you are to be engaged. But, even then, it is of the utmost importance, if you can, to select a post, not on account of the amount of remuneration which it secures to you, but rather on account of the character and abilities of the chief under whom you are to act. A well-known country practitioner in a mining district, who was in the habit of seeing patients at his surgery every morning, once said to me, "Do what I will, Dr. Anderson, I find that I cannot examine and dispense medicines for

more than sixty patients an hour." He was a very genial, and, in many respects, a very loveable man, but he must have proved but a poor guide to the budding practitioner. For, if there is one thing which is more indispensable than another to learn, at the very outset of your professional life, it is to be thorough, and to act up to the principle that "Whatever is worth doing at all is worth doing well."

Those who can afford the time and the money, should not fail to avail themselves of the opportunity of studying abroad, especially in Germany and in France, before settling in practice, and this is an additional plea to the one which I mentioned in my introductory address, for insisting upon French and German obtaining a fuller recognition in the preliminary examinations; for I need hardly say that the attempt, which is too often made, to study in a foreign country without a knowledge of the language, is a comparatively useless proceeding. I do not say that Continental schools contain more eminent men, or more distinguished teachers, than are to be found at home, but they undoubtedly receive a much more generous recognition from the State. In illustration of this I may point out that, while our Government have grudgingly consented to contribute £42,000 a-year to the four Scotch Universities combined, the University of Berlin alone receives government aid to the extent of about £100,000 per annum. The teachers are thus put in possession of more complete appliances, and more fully equipped laboratories than are to be

found at home, and special departments are adequately represented in the hospitals, of which they have not failed fully to avail themselves. It is a great thing, too, to be in a position to come personally in contact with men whose names to us are as household words, such as Pasteur, Charcot, Virchow, Billroth, Hebra, and a host of others whom I need not mention, and to get an insight into certain departments of medicine and surgery which are not so fully recognised in England. And if you decide to spend some time abroad, take to heart the advice which my revered teacher, Allen Thomson, gave me under similar circumstances, "Do not," he said, "be too particular as to *what* you learn, for you will be surprised to find that information, which you may think of little use at the time you acquire it, comes to be unexpectedly valuable in after years." And remember that, apart altogether from the professional information which you may obtain, the familiarity with other countries and cities, the intercourse with the inhabitants of other lands, the endeavour to express yourselves in foreign tongues, and the study of the art and literature of other countries, is, of itself, a culture of the mind which proves of the utmost value to the medical man; for a doctor, who can speak of nothing but his own profession, is a very tiresome creature, and deprives himself of a most important element of success.

Another way of occupying the intermediate time between graduation and entering upon practice, is to secure appointments—of which there are many—as

medical officers to American, Australian, or other passenger steamers. Such posts are specially to be recommended in the case of those who have a hereditary or acquired delicacy of constitution, or who are anxious, before settling down, to see a little of the world. But I would strongly advise you not to continue at such work for more than a year or two at the most, for it affords but few opportunities for cultivating your profession, and the life is a comparatively idle one, so that it is apt to indispose you to encounter the labours inseparable from private practice.

Sooner or later you will have to make up your minds as to how, and where, you are to practice, and to decide whether private practice, or the public services, are most congenial to you.

At the present time a number of new appointments are about to be made in the sphere of public health.

By the new Local Government Act, in relation to public health, the country is mapped out into districts, or counties as they are termed, each managed by bodies of gentlemen called County Councillors, and one of the duties of these gentlemen is to appoint a Medical Officer, or Medical Officers, of Health for each County. In Scotland such appointments are compulsory, and the gentlemen holding them are not removable, except with the consent of the Board of Supervision, a most important proviso, because it enables the Medical Officer to discharge his duties without fear and without favour. In England, on the contrary, such a stipulation has, unfortunately,

been dispensed with, and, indeed, the County Councils are not bound to appoint Medical Officers at all, unless they please—grievous mistakes, which, sooner or later, must be rectified. After the 1st January, 1893, no person shall be appointed Medical Officer for a County which contains a population of 30,000 or upwards, unless he is registered as the holder of a diploma in sanitary science, public health, or state medicine. And no Medical Officer shall hold any other appointment, or engage in private practice or employment, without the express written consent of the Council. On the other hand, if any Medical Officer loses his office, he is entitled to compensation, which is not to exceed the amount to which a civil servant is entitled on abolition of office—*i.e.*, one-sixtieth of his salary for each year of service up to forty years.

Some of you may have it in contemplation to join the Army Medical Staff, so that it may be well to make a passing allusion to this department of the public service. Its advantages may be briefly stated. In the first place, there is the prospect of an early appointment to duties which, in general, are not of an irksome nature. To a young man, possessed of the spirit of adventure, there is the opportunity of visiting many lands and of meeting many interesting people. He sees little of the squalor of poverty, and none of the keen and greedy competition so common in civil life: the pay is fairly good, and the pension sufficient for the moderate wants of a man's declining years. If he can never hope to draw a great prize, he can never, at least, draw a blank, and his income

is, perhaps, equal to the average drawings of his professional brethren in civil life.

After passing an examination in London, the army surgeon proceeds to Netley and Aldershot for special instruction in subjects relating to military service. He is then appointed to one of the large military stations, and after two or three years of home service, is sent abroad for a definite period, and this going and coming is the normal condition of his life.

The numerous Royal Warrants published during the last thirty years, show a gradual increase of pay offered by the Government, not out of any liberal spirit, but because good men refused to enter the service under the old regulations. The military authorities refer to this and speak of it as a strike, but it was no strike on the part of military medical officers, it was simply a refusal by young surgeons to accept terms which were considered unsatisfactory.

Seeing, however, that the conditions offered were gradually becoming more liberal, why was it that the Medical Profession was dissatisfied? The answer is a simple one. A concession was given grudgingly under the pressure of necessity, and was withdrawn when the pressure was removed, thus producing a feeling of insecurity, and of want of faith in the promises of Ministers of War. It is true that the actual pay has not been lowered, but the other conditions of service are much less favourable than formerly. For example, the number of administrative appointments has been considerably reduced, while the period of foreign service has been extended, and, as regards leave, medical officers, when suffering from

illness contracted in, and by, the service, are denied the privileges accorded to combatant officers. "Comment on this flagrant injustice is not needed; it is simply shameful." It is, therefore, not to be wondered at that the ratio of mortality amongst medical, is double that of regimental officers.

The last grievance against the department, and one which is deeply resented, is the abolition of relative rank. Formerly a surgeon held the relative rank of captain, a surgeon-major that of major, and lieutenant colonel, and so on, but suddenly an order was published abolishing relative rank altogether. This was felt to be the most bitter attack ever made against the department, for there is no shutting one's eyes to the fact that if medical officers possess no relative rank, they can hold no other position in an army than that of camp-followers, no rank being known to soldiers save military rank. The authorities held that the grievance complained of was a sentimental one, but they so far acknowledged their mistake, as to restore in a modified form the rank that had been so injudiciously withdrawn. But the opinion is all but unanimous in the medical department, that military titular rank must be conceded. The officers of the department which supplies bread and meat, of another which has the custody of stores, of another in charge of barracks, of another in charge of transport, of another which issues pay, have all military rank; while medical officers who are in intimate relations with soldiers, who accompany them to the field of battle, and share with them every hardship and danger, are considered unfit to receive a military

title, because, forsooth, it is contrary to military instincts. That is a caste prejudice which can only be removed by the unanimous voice of the Medical Profession, which is demanding now, and will insist on obtaining for its professional brethren, terms of perfect equality with other officers. "If," says the *British Medical Journal*, "with such information before you of the conditions of service and the hostile animus which prevails in high places against the department, you accept service in it, you cannot in after years say with truth that you took a leap in the dark."

Time will not permit of a reference to the Navy, further than to say that the medical officers of this branch of the services are, I believe, fairly well satisfied with their status and emoluments.

The great majority of you, however, are destined to engage in private practice. For this your college training is but the introduction, because there is much that cannot be acquired in school or in hospital, and which can only be learned with increasing years. It will be your duty, in the future, not to limit yourselves to the study of diseases, but to extend your observations to the study of patients—for no one patient is the exact counterpart of another, and it is the patient you have to treat no less than the disease. You must learn how to deal with each individual—to be firm with one, to be gentle with another; sometimes to take your patient thoroughly into your confidence, to explain to him the essential features of his case, and the principles upon which you propose to deal with him; sometimes to exercise the greatest reticence, both as regards the present

and the future—in a word, you must exercise tact, which a few possess instinctively to a remarkable degree, while the majority can attain it, at least to a moderate extent, by careful observation at the bedside, as well as in the walks of private life. Indeed, it may safely be affirmed that, given two men, one possessed of excellent abilities, and with a good knowledge of his profession, but wanting in tact, and the other with but fair abilities, and less skilful, but full of tact, the latter will pretty surely outstrip the former in the race of life.

Another most valuable attribute, and one which only comes with increasing years, is experience—a quality which, there is reason to fear, is too often depreciated at the present day, both by patient and immature practitioner.

A young man who has distinguished himself at College, who is primed with the most recent views, who has a knowledge of the newer methods, and who revels in the possession of all the newest instruments and accessories to practice, is very apt to despise the older practitioner; but I have no hesitation in saying that the latter is generally by far the more reliable guide in the treatment of disease.

It may safely be affirmed that a man who, with good abilities, and a well-grounded knowledge of his profession, combines tact and experience, is almost certain to be successful, always provided that he has the best interests of his patients at heart, and, no matter at what amount of personal inconvenience to himself, does everything in his power to relieve their sufferings and to cure their diseases.

It is not given to all of you to attain eminence in your profession, but you can, at least, aim at a high ideal, prove good and useful citizens, and leave the world all the better for your having lived upon it. And remember that, as Broussais has observed, "The real physician is the one who cures: the observation which does not teach the art of healing, is not that of a physician, it is that of a naturalist."

